NINDS/NIDCD ANIMAL STUDY PROPOSAL CHECK LIST

Investigator must follow proposal submission procedures indicated below. *Each individual listed below must initial and date indicating review.*

1	Reviewed and approved by your ACUC Lab/Branch representative. You can obtain your ACUC Lab/Branch representative's name and phone number by contacting the ACUC Executive Secretary (see chart below.)		
2.		pational Safety and Health Consultant or uired for Recombinant DNA, Infectious fety.	
3.	_	ng Veterinarian(s). The name(s) and phone ontacting the ACUC Executive Secretary (see	
4.	All sections are completed, signatures in Section O and forms under Section K are attached, and proposal is ready for submission to ACUC.		
EMERGENCY C	ONTACTS:		
Primary Contact	in Case of Emergency:		
Work #:		Home #:	
		Beeper #:	
Alternate Point o	f Contact in Case of Emergency:		
Work #:		Home #:	
		Beeper #:	
•	· · · · · · · · · · · · · · · · · · ·	sh to be called there; if not, they agree to dealing with emergencies outside working	

NINDS/NIDCD Animal Health and Care Points of Contact:

Anne Schaffner, Ph.D.	Chairperson, ACUC	(301) 402-1396
Judith Davis, D.V.M., M.S.	Chief, AHCS	(301) 402-1636
Victoria "Tori" Hampshire, D.V.M.	Clinical Veterinarian	(301) 496-7107
Ida Lirette	Executive Secretary, ACUC	(301) 496-8488
Mark Foster St. Claire, D.V.M., M.S.	Clinical Veterinarian	(301) 402-0068
Lowrey "Dusty" Rhodes, D.V.M.	Clinical Veterinarian	(301) 402-3188